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ABSTRACT

Activities and accomplishments of the Napa (California) program for disabled infants, birth to 5 years old, are summarized; and forms and program materials are presented. Components of the program, which served 25 children (birth to 3 years old) in 1981-1982, are discusssed as follows: early identification of children at risk; developmental assessment to determine each child's strengths and needs; classroom and home-based programs and a transitional classroom; support services for parents; curriculum development; staff training; and demonstration/dissemination activities. Appended materials include a search/referral form; a self-rating form--Parents Strengths and Needs Assessment; information on programs and agencies for parents; curriculum units and guidelines; evaluation data sheet; technical assistance agreements; information on site training; a list of videotapes of conference addresses on infant and young children with special needs; and an introduction to a slide presentation on infant intervention components. (SEW)

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FINAL PROGRAM PERFORMANCE REPORT

The Napa Infant Program

(CFDA Number 84 024)

July 1981 - June 1982

California Institute on Human Services

at

Sonoma State University
1801 E. Cotati Avenue
Rohnert Park, CA 94928

EC151099

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Introduction

The Napa Infant Program (NIP) has completed its third year of demonstration. This report summarizes activities of the project, highlighting the third year, and provides evaluation data for three years of program intervention.

The program participants, children birth to three years with disabilities, were provided with direct services in the areas of assessment; educational intervention; and speech, occupational, and physical therapy. Parents were assessed for their needs and provided with an assortment of parent training interventions. Demonstration activities were carried out as planned: a ten-minute slide show was developed, parent training materials were developed, a curriculum system was developed, and the NIP needs assessment instrument was sent out to an additional seventy-three agencies across the nation. The project also participated in a statewide demonstration activity, SERN (Special Education Resource Network), one of ten such sites in California.

Overview of Accomplishments

Direct and Supplementary Services for Children

Direct Services. The NIP program provided three types of developmental intervention: a classroom program, a home-based program and a transition classroom.

The classroom program was provided five days a week, four hours per day, including the summer. Developmental programming included: self-help skill development, gross motor and fine motor development, cognitive development, language development, and

social development. Children were regularly (one day per week) integrated with normally developing children for social development via a nearby regular preschool. Staff for the program included special education teachers (three full time), a speech therapist, an occupational therapist, and a physical therapist. Three full time classroom aides were also part of the staff in addition to all the support personnel of the Napa County Office of Education. These same staff implemented the home-based portion of the program and the transition classroom.

The home-based portion of the program was offered to project students if they were under eighteen months of age or if they were too severely medically involved to attend the classroom. Approximately one-third of the students were home-based program participants. The home-based program provided the same developmental intervention as the classroom program.

The transition class was set up to facilitate children entering the classroom program. It was used as an adjunct to the home-based program. Children attended one hour, three days a week with the parent.

Search. The NIP program continued to search for new project participants throughout the third year. The search/referral form was sent to area professionals, social service agencies, and physicians (see Appendix A). Public Health continued to be a major source of new referrals.

Transitional Services. The NIP staff worked closely with staff of regular and special programs when students became ready

to transition to other placements. Staff of the new programs were called in to sit on the IEP team and plan the child's new program. NIP staff made regular visits to the new programs (accompanying the child full time for the first week) until adjustment was complete.

Parent and Family Participation

Parent involvement was a critical component of the NIP program. During the first year, project staff developed a Parents' Strengths and Needs Assessment which assessed parents' needs and ascertained their level of skill and knowledge in a variety of developmental areas (see Appendix B). The assessment instrument was used in each of three years at the beginning of the school year to plan special parent interventions and activities, and at the end of the school year to determine gains in knowledge and skills.

The transition classroom described above provided an opportunity for parents to work one-to-one with teachers, therapists, and their child. Once the child was a regular NIP classroom participant, parents were encouraged to remain active and involved in the program.

The home-based program was essentially a parent-training program. Teachers and/or the appropriate therapist developed a program for the child and trained the parent to implement it in the home.

Parent Group. The parents of NIP children formed a group called "Parents of Exceptional Children." This group conducted

search activities and counseling to parents with newly identified children with disabilities. The group sponsored lectures, presentations, and workshops in a variety of development areas. The parent group brochure and description appear in Appendix C. The parent group was active in disseminating training materials developed by staff (described below).

Parent Training Modules. Parent materials were developed to provide information to parents on topics of concern. The topics were those identified via the yearly needs assessment as being the most critical. Modules were developed on these topics:

Cognitive Development
Language Development
Gross Motor Development
Social Development
Self-Help Skills
Advocacy
The Special Education System
The Regional Center System

The modules were either sent to parents at home or used for the NIP resource library in the classroom. Most of the modules had an accompanying toy/object/accessory to be used directly with the child to accomplish the developmental tasks of the specific modules (for example, a "scoop" dish was included with Self Help Skills, a puppet for Language Development, and a block set for Cognitive Development.

Curriculum Development

Staff of the NIP developed a curriculum system based on the concept of "circle groups." Circle groups are groupings of children by developmental ability in various areas. A description

of the NIP curriculum is presented in Appendix D. The system is designed to provide teachers and classroom aides with instructional activities for specific instructional objectives. An example of the curriculum units appears in Appendix E. Over 166 of these units were developed. The units are typed on labels and organized into a file system. The system is available for duplication (which is facilitated via the label process) for other programs to use.

Method for Assessment of Child Progress

The Napa Infant Program teachers, speech therapist, and occupational therapists tested children before entry into the program and at least once per year of program intervention. Most children were tested upon exit from the program as well.

The following developmental measures were included in the assessment battery:

The Bayley Mental
The Bayley Motor
The Stanford Fine Motor
The Expressive Reel
The Receptive Reel
The Help (Cognitive, Language, Gross Motor, Fine Motor, Social and Self Help)
The Brigance Inventory of Early Development:
- A. Pre-Ambulatory Motor Skills and Behaviors
- B. Gross Motor Skills and Behaviors
- C. Fine Motor Skills and Behaviors
- D. Self Help Skills
- E. Pre-Speech
- F. Speech and Language Skills
- G. General Knowledge and Comprehension
- H. Readiness
- I. Basic Reading Skills
- J. Manuscript Writing
- K. Math

Most of the developmental measures were administered for assessment purposes. Often, follow-up testing was not performed on the same measure. Data from the Stanford tests, the Help, and the Brigance were not included in this evaluation because there were not more than ten complete data sequences (pre and post testing) for any of these measures. Statistical analysis of such a small number of cases would be misleading.

Data from the Bayley and the Expressive and Receptive Reel will be discussed for the purposes of this evaluation.

A data form was designed to record evaluation data from all assessment instruments for up to five repeated testings (see Appendix F). Demographic data (birth date, ethnic group, handicapping condition, date entered program, family constellation, type of program intervention, and type of family) were also recorded on the form. The forms were completed for each child and kept in their files.

Results of Child Assessment

Demographics. Data of children from all three years of the program were complied for this evaluation. Thirty-eight (38) cases of data were complete with pre to post testing on at least one developmental measure.

Demographic variables were analyzed by frequency (%) of cases in each category. Results of these analyses appear in Tables 1-5.

The largest percentage of project children were Caucasian

(68%). Mexican American was the next highest category (21%) (see Table 1). Most of the children were identified as TMR (24%), orthopedically impaired (22%), and speech impaired (14%) (see Table 2). The majority of children had two parents in the home (73%), and 65% of their homes were natural, rather than foster or adoptive (see Tables 3 and 4). Over half of the children (67%) were provided with classroom rather than home-based intervention (see Table 5).

Table 1

Ethnicity of Children

Group	Frequency
Black	7.1%
Oriental	3.6%
Mexican American	21.4%
Caucasian	67.9%
Indian American	0
Other	0
Total	100%

Number of Cases Analyzed = 28

Table 2

Handicapping Condition

Category	Frequency
TMR	24.3%
EMR	0
Specific Learning Disability	8.1%
Blind or Deaf Blind	0
Hard of Hearing/Deaf	2.7%
Visually Handicapped	0
Severely Emotionally Disturbed	2.7%
Speech Impaired	13.5%
Other Health Impaired	10.8%
Orthopedically Impaired	21.6%
Multi Handicapped	10.8%
Developmentally Delayed	2.7%
High Risk	2.7%
Failure to Thrive	0
Total	100%

Number of Cases Analyzed = 37

Table 3

Family Constellation

Parents in Home	Frequency
Single Parent	26.9%
Two Parents	73.1%
Total	100%

Number of Cases Analyzed = 26

Table 4

Type of Family

Type of Family	Frequency
Natural	65.4%
Foster	30.8%
Adopted	3.8%
Living with Relative	0
Total	100%

Number of Cases Analyzed = 26

Table 5

Type of Program Intervention

Program	Frequency
Classroom	66.7%
Home-Based	33.3%
Total	100%

Number of Cases Analyzed = 27

Developmental Measures. Quantitative analyses were performed only on developmental measures for which ten (10) or more complete pre to post testing sequences were accomplished. Statistical tests of significance were then applied to complete sets of ten (10) or more cases. Ten or more cases had complete Bayley, Expressive Reel, and Receptive Reel data.

Data from all three years were organized into two groups:

(1) data collected within the first year of intervention (3-12 months), and

(2) data collected after one to two years of intervention (13-22 months).

● The Bayley Mental Form: The results of the T-test analysis of pre to post test scores on the Bayley within the first year are presented in Table 6, $t(23) = .43$, $p < .67$. While the T-test did not show significance, note that the mean increased by a full month from 14.41 months to 15.70 months.

The results of the T-test analysis of pre to post test scores on the Bayley after one to two years of intervention are shown in Table 7, $t(11) = .74$, $p < .48$. These results are similar to the results obtained within the first year but stronger, although they do not reach significance. The means increased from 16.91 months to 21 months.

● The Expressive Reel: Table 6 displays the results of the T-test analysis of pre to post test scores on the Expressive Reel within the first year, $t(27) = 5.11$, $p < .000$. This is a highly significant outcome in the positive direction.

The results of the T-test analysis pre to post test scores on the Expressive Reel after one to two years of intervention are shown in Table 7, $t(27) = 5.12$, $p < .000$. This is another highly significant outcome.

● The Receptive Reel: T-test analysis of pre to post test scores on the Receptive Reel are consistent with the Expressive Reel. Table 6 presents data collected within the first year, $t(27) = 5.79$, $p < .000$. This is a highly significant finding. Results of the analysis of pre to post test scores collected after one to two years are also highly significant, $t(12) = 5.61$, $p < .000$ (see Table 2).

The results of all developmental analyses are summarized in Figure 1.

Table 6

Pre to Post Changes on Developmental Measures

Within the First Year of Program Intervention[1]

Measure	Number of Cases	Mean	Standard Deviation	Standard Error	T Value	2-Tail Prob.
pre Mental Bayley	24	14.41	16.70	3.41	-.43	.67
post Mental Bayley	24	15.70	8.41	1.71		
pre Expressive Reel	28	9.78	5.78	1.09	-5.11	.000*
post Expressive Reel	28	14.53	8.82	1.66		
pre Receptive Reel	28	11.64	6.77	1.28	-5.79	.000*
post Receptive Reel	28	17.10	9.58	1.81		

* statistically significant finding

[1]These analyses are the results of from 3 to 12 months of program intervention

Table 7

Pre to Post Changes on Developmental Measures

After One to Two Years (13-27 Months)

of Program Intervention

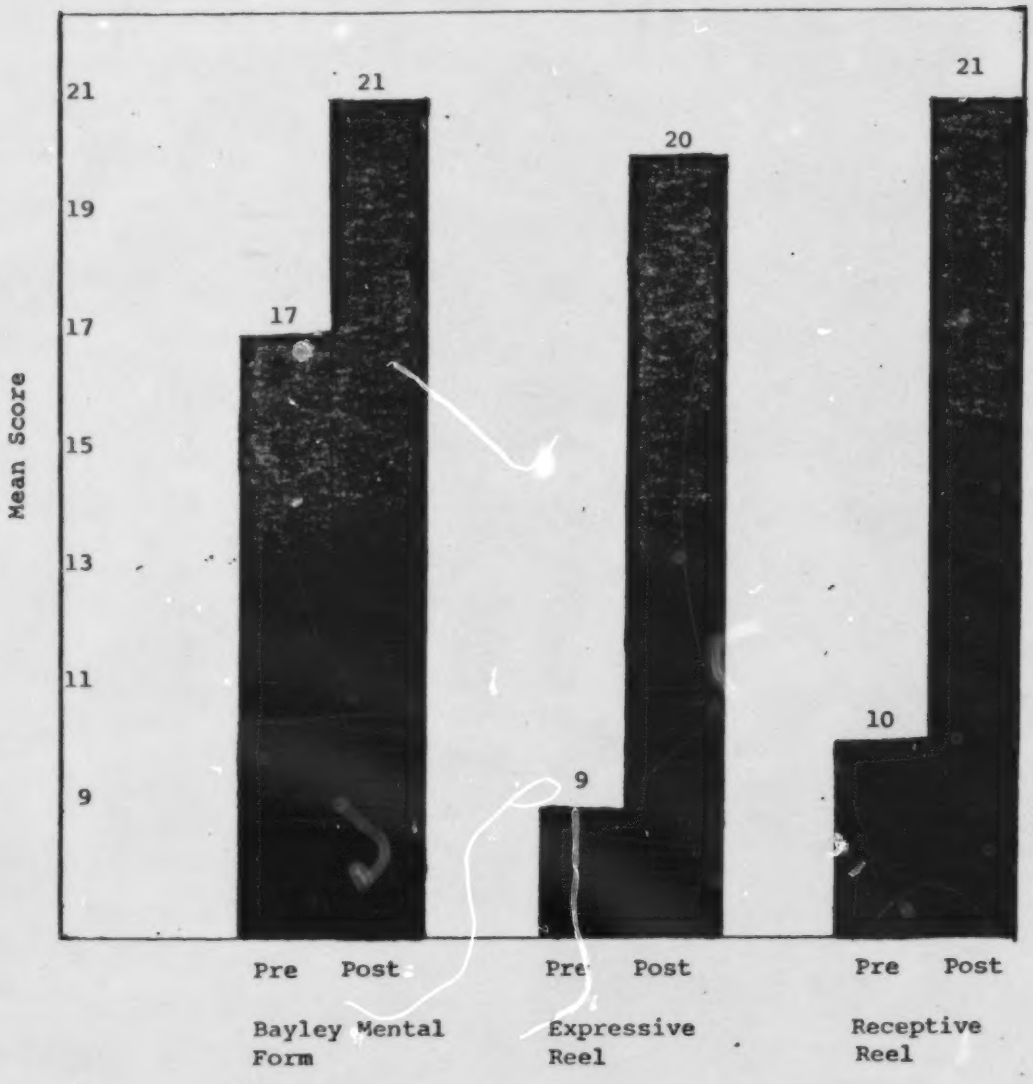
Measure	Number of Cases	Mean	Standard Deviation	Standard Error	T Value	2-Tail Prob.
pre Mental Bayley	12	16.91	22.74	6.56	-.74	.48
post Mental Bayley	12	21.00	7.37	2.12		
pre Expressive Reel	13	9.00	6.12	1.69	-5.12	.000 *
post Expressive Reel	13	20.38	10.71	2.97		
pre Receptive Reel	13	12.00	6.351	1.761	-5.61	.000 *
post Receptive Reel	13	21.15	11.12	3.086		

* statistically significant finding

Figure 1

Growth on Developmental Measures After

One Year to Two Years in Program (13-27 months)



Inservice Training

Inservice to project staff was provided primarily through WESTAR (see Appendix G). WESTAR provided inservice in computer applications, multi-cultural instructional procedures, and cost effectiveness evaluation during the third year of the project.

All NIP staff attended conferences offered within the Northern California area pertaining to their specific fields.

The project director, Dr. Thomas Cooke, placed two special education graduate students in the NIP. He provided specialized training to the NIP staff regularly along with the student teachers in the classroom.

Training for Personnel From Other Programs

The NIP program joined the California Special Education Resource Network (SERN) in the third year of demonstration. SERN provided a vehicle not only to demonstrate the project, but also to in-service other program staff. Two products were used extensively for this in-service: (1) the NIP curriculum system, and (2) the parent training moduels. See Appendix H for a description of NIP SERN activities.

Another way the NIP provided in-service to other professionals was through the Napa Infant Conference. Staff sponsored key infant specialists to speak at the conference and produced tapes which have been disseminated to programs all over California (see Appendix I).

The NIP slide show is also used as an in-service material. It is discussed below.

Demonstration/Dissemination Activities

The NIP conducted several activities to demonstrate the program. Each year the NIP Brochure (Appendix J) and poster (Appendix K) are disseminated throughout the Napa and Sonoma County areas. A ten-minute slide show was developed (with an audio portion) to describe the project. This is primarily used with professionals (other educators and administrators, health professionals, etc.) but also for parents and community groups. The narrative is included in Appendix L. It is available upon request.

The dissemination of the NIP Parents' Strengths and Needs Assessment is perhaps the most active demonstration activity. Over 73 of these instruments were sent out just in the last year of the project. The instrument is referenced in several BEH and WESTAR publications and in national professional journals. A list of agencies that requested and received the instrument in 1982 (free) appears in Appendix M.

The NIP curriculum described earlier (see Appendix D) was designed to be easy to disseminate. Labels are photocopied and applied by the recipient to index cards. Recipients also receive a detailed manual describing the system and how to use it.

Finally, SERN has provided an additional vehicle for project demonstration. NIP's involvement with SERN was

described earlier and summarized in Appendix H.

Coordination with Other Agencies

The NIP program coordinates with:

- Public Health
- Crippled Children's Service
- North Bay Regional Center
- Easter Seals
- California Protection and Advocacy
- Napa County Office of Education
- Napa Valley Unified School District
- Catholic Social Service of Napa
- Family Service of North Bay
- Napa County Mental Health Services
- Sonoma State University
- California Department of Education, Special Education Resource Network (SERN)

Continuation and Replication

The Napa County Office of Education has committed to financing and sponsoring NIP for the next (fourth) year (see Appendix N). This public education liaison will provide funding, staffing, and a site for the program for future demonstration.

Components of the program will be replicated via Outreach funding for the fourth year (the reader is referred to the System for Planning, Evaluation, and Efficacy Demonstration (SPEED), Outreach proposal submitted 2/82).

The SERN linkage with the California Department of Education will supplement the Outreach activiteis in continuing to provide in-service in direct service components of the NIP project.

Appendix A

Search/Referral Form

EC151099

FLOYD E. SEIFERT
Superintendent

OFFICE OF THE SUPERINTENDENT
NAPA COUNTY SCHOOLS
4032 Maher Street, Napa, California 94558
Telephone (707) 224-3151

LEO M. MILLER
Assistant Superintendent
Business Services

ED HENDERSON
Assistant Superintendent
Educational Services

HARLEN SMETZER
Assistant Superintendent
Special Services

May 7, 1980

Dear Professional:

This letter is a follow-up to our conversation regarding the Napa Infant Program. To summarize for you, the Napa Infant Program is sponsored by the Napa County Office of Education. Free educational, and related services are offered to children between the ages of birth and five years who have developmental handicaps. The program is staffed by three teachers who have graduate degrees in special education, a speech therapist, and an occupational therapist. The following services are offered through either home based programs or classrooms:

-Early identification of children at risk

-Developmental assessment to determine each child's strengths and needs

-Individual programming for the children

-Support services for parents

-Opportunity for children to interact with peers in nearby preschool

The classroom program operates 5 days a week from 9:00 - 12:30. Children are transported free of charge.

Please use the enclosed referral form to refer children to the Napa Infant Program for services. Or, if you prefer, call (707) 224-3151.

REFERRAL FORM

A-2

NAPA INFANT PROGRAM

Office of the Superintendant
Napa County Schools
4032 Maher St.
Napa

To: Napa Infant Program Teachers

From: _____
(Agency or Office)

Person submitting referral _____

Position of person submitting referral _____

Name of child being referred _____

Parents' names: Mother _____

Father _____

Parents have given consent for referral? Yes___ No___

Phone and address where parents can be contacted:

Address _____

_____

Phone _____

I am referring the child for assessment because of the following reasons:

_____

_____

_____

_____

_____

_____

_____

Thank you for helping us to help this child.

Appendix B

NIP Parents' Strengths and Needs Assessment

PARENTS STRENGTHS AND NEEDS ASSESSMENT

DEVELOPED BY JOAN RUSKUS, M.A.

NAPA INFANT PROGRAM

Your name: _____ You are: ( ) Mother ( ) Father

Please rate each of the following areas for:
1) its importance to you as a parent
2) your current level of knowledge in each area
3) your current level of skill in each area (if appropriate)
4) your preferred method of receiving information of training in each area

EDUCATION	1. Importance: No importance	Very little	Some	Very important	Critical	2. Knowledge: No knowledge	Very little	Some	Considerable	Expert level	3. Skill: No skills	Very little	Some	Considerable	Highly skilled	4. Method: Written material	Parent Group Meetings	Individually w/ teacher	Individually w/ other consulting professional
1. How to have Productive Conferences with Teachers																			
2. Special Education Terminology																			
3. Future Schooling																			
4. Vocational or Future Job Training											N/A								
5. Your Child's Educational Program																			
6. Recording your Child's Progress at Home																			
7. Assessment Procedures and Tools																			
8. Integration of Handicapped Children with Nonhandicapped											N/A								
9. How to Participate in Classroom Activities																			

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	1. Importance					2. Knowledge					3. Skill					4. Method				
	No importance	Very little	Some	Very important	Critical	No knowledge	Very little	Some	Considerable	Expert level	No skills	Very little	Some	Considerable	Highly skilled	Written Material	Parent Group Meetings	Individually w/ teacher	Individually w/ other consulting professional
Child Development																			
10. Working with your Child in: Motor Development - Small and Large Muscle Coordination																			
11. Language Development-what your Child Understands and what your Child says																			
12. Cognitive Development - Problem Solving and Thinking Skills																			
13. Social Development - Ability to Get Along with others																			
14. Self Help - Toileting, Eating and Dressing																			
15. Discipline																			
16. Selecting Books and Toys for the Family																			
17. Helping your Children to like Themselves																			
18. Value of Play											N/A								
19. Family Problems																			
SUPPORT																			
20. Community Resources/Agencies that can Help you and your Child																			
21. Respite - Child Care											N/A								
22. Financial Assistance																			
23. How to use Professions (Physicians, Therapists, Counselors, Educators, Publif Health Nurse, etc.)																			
24. Legal Aid											N/A								
25. Out-of-Home Placement																			

CALIFORNIA INSTITUTE ON HUMAN SERVICES 1982

	1. Importance					2. Knowledge					3. Skill					4. Method				
	No importance	Very little	Some	Very Important	Critical	No knowledge	Very little	Some	Considerable	Expert level	No skills	Very little	Some	Considerable	Highly skilled	Written material	Parent Group Meetings	Individually w/ teacher	Individually w/ other consulting professional
HEALTH																			
26. Nutrition																			
27. First Aid Procedures																			
28. Dental Needs											N/A								
29. Medical Problems of Young Children																			
30. Genetic Counseling																			
31. Information on your Child's Handicapping Conditions																			
LEGAL																			
32. Laws Relating to Special Education PL 94-142											N/A								
33. Financial Support																			
34. How to Advocate for your Child --How to get what your child needs																			
35. How to Influence School/County /State & Federal Policy & Law																			

If you have checked "Parent Group Meeting" as a means of receiving information or training in any of the above areas, please indicate below which are the best times for you and your spouse to attend meetings (circle your choices).

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
morning	morning	morning	morning	morning	morning	morning
afternoon	afternoon	afternoon	afternoon	afternoon	afternoon	afternoon
evening	evening	evening	evening	evening	evening	evening

Please check if you need: ____ transportation ____ babysitting

I will help with ____ planning ____ telephoning ____ transportation

Telephone: _____

Address: _____

Please check any of the following skills that you would be willing to share with another parent or in the classroom.

36. ____ Reading a story to some of the children?
37. ____ Teaching a song or some music activity?
38. ____ Conducting an art activity?
39. ____ Conducting small group instruction?
40. ____ Preparing and helping serve snacks?
41. ____ Helping make playground materials?
42. ____ Cooking or baking with some children?
43. ____ Planning a field trip for the children?
44. ____ Doing typing for the classroom?
45. ____ Helping make materials for use in the home or for the classroom?
46. ____ Bringing refreshments for a holiday party?
47. ____ Playing games with the children?

OTHER IDEAS _____

_____

_____

Thank you for helping us help your child

CALIFORNIA INSTITUTE ON HUMAN SERVICES, 1982

Appendix C

Parents of Exceptional Children Materials

Parent to Parent

As the parent of a newborn, or newly diagnosed handicapped child, it is helpful to know that other families have had similar experiences and have managed to cope.

Parent to Parent serves as a link between parents who have developmentally disabled children and you, the new parent.

Trained parent volunteers are available to talk to you, to listen and give encouragement and support. All of them have had feelings similar to those you now feel. They have found strength and hope in their situations and want to share their experience to help you understand and adjust to your family situation.

This service is offered out of concern for you, your disabled child, and your family. There is no fee.

Parent to Parent can also provide information about community resources and available services which may be helpful to you.

If you, or someone you know, would like more information about Parent to Parent, contact one of us at:

(707) 224-3916 or (707) 255-1835

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I WOULD LIKE MORE INFORMATION ABOUT THE PARENT TO PARENT PROGRAM.

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

Parents of disabled children
talk to parents

Parent to Parent

Parent to Parent
Parents of Exceptional Children
445 East First St.
Napa, CA 94558

designed by: Antelope graphic design

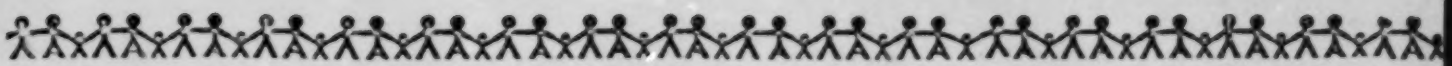
PLEASE STAMP

Parent to Parent
Parents of Exceptional Children
445 East First St.
Napa, CA 94558

Resources for Children with Special Needs in Napa County

Parent to Parent

Napa CA



INTRODUCTIONS

INITIAL CONTACTS

ADVOCACY SERVICES

DAYCARE – RESPITE

TRANSPORTATION

USEFUL ORGANIZATIONS

EDUCATION

COUNSELING

HOT LINES

PARENTS GROUPS

Many people discover that rearing a youngster with special needs is a rewarding experience.

...At Times FRUSTRATING

...At Times EXHILARATING

...Always FASCINATING!

This directory is intended as a starting point for you as a parent of a newly identified disabled child.
You will soon learn your way around the support system. If you have difficulty locating a certain service, contact us:

- - Parent to Parent - -

at 224-3916 or one of the following:

AREA IV BOARD.....Enterprise - 18799 - 252-6644

Napa County Library Information.....253-4241

GOOD LUCK

CALIFORNIA CHILDREN'S SERVICES, 2281 Elm St., Napa, CA 94558 253-4391

Provides diagnostic examinations to any child with a suspect eligible condition (orthopedic disorders, heart and kidney diseases, accidental injuries, severe burns, birth defects, malignancies, metabolic and endocrine disorders, serious eye and ear conditions, cerebral palsy and other crippling diseases). On going care and a treatment plan assured for eligible children. Fee based on family income.

EASTER SEAL SOCIETY, 1767 Laurel St., Napa, CA 94558 226-5364

Purchases speech and physical therapy; provides camperships for handicapped children, provided that these children cannot be served by any other agency in Napa County; purchases orthopedic shoes and devices, prosthetic aids, transportation and medical supplies; maintains an extensive loan service, such as beds, wheelchairs, etc. Information and referral services are provided to all callers. Hearing aid loan program. No fee.

NAPA INFANT PROGRAM (NIP) Napa County Superintendent of Schools, 4032 Maher, Napa, CA 94558 224-3151

Services: Home visiting, infant stimulation program. Trains parents to work with their child at home. For children under three years who have or are suspected of having developmental problems. No fee.
Director: Bernice Bettencourt

NORTH BAY REGIONAL CENTER, 1710 Soscol Ave., Napa, CA 94558 252-0444
Offers many services for people with retardation, cerebral palsy, seizure disorders, autism and neurological handicaps. Services include diagnosis, information and referral counseling, case management, guardianship. The center purchases other services such as pre-school training programs, speech therapy, respite, recreation, orthopedic appliances, workshop services, foster home care. No Fee. Voluntary donations accepted. Director: Jane Rasmussen.

PARENT-TO-PARENT, program sponsored by Parents of Exceptional Children, 445 E. First St., Napa, CA. A group of parents of children with handicapping conditions who have had training to be of help to parents of newly identified children. Parent-to-Parent volunteers will listen and share with you at your request, or will be happy to accompany you on appointments. The parent chosen to contact you will be matched to your situation. No Fee. Coordinators: Linda Cranor, Mary Kuntz. 224-3916 or 253-0808.

NORTH BAY REGIONAL CENTER, 1710 Soscol Ave., Napa, CA 94558 252-0444
Provides clients' rights representation and advocacy on behalf of persons with developmental disabilities.

CALIFORNIA PROTECTION AND ADVOCACY, 1400 K St., Suite 307, Sacramento, CA 95814

Tollfree hotline 800-952-5746-TTY 916-447-3331

The hotline is a toll-free number to be used by people with developmental disabilities, their parents or guardians, and other individuals who have questions and problems related to developmental special needs. The hotline is open from 8:30 A.M. to 5:30 P.M., Mon. thru Fri.

In many cases, your neighborhood teenager would be just fine.

If your child needs more specialized care, or care for a longer period of time, we suggest:

BABYSITTING SERVICES AND DAY CARE PROGRAMS

Rainbow Child Care Council, 703 Jefferson St., Napa, CA 94558 253-0366
Maintains a list of babysitters by geographical area. Maintains a list of day-care operators who are interested in special children; no fee; has a toy lending library.

RESPITE SERVICES

Jody and His Friends Respite Service, 2548 Tennessee St., Vallejo, CA 644-6556
Provides trained home companions for children and adults with special needs. Offers in-home and out-of-home respite. Funded through North Bay Regional Center.

DIAL-a-RIDE, 2333 Roberto St., Napa, CA 94558 224-2351
Bus service provided to Napa residents living in or near the City of Napa. 50¢ per ride.

TRI-CITY BUS, 473 Main St., St. Helena, CA 94574 963-4222
Door to door transportation in St. Helena, Calistoga, and Angwin in air conditioned, 10 passenger van driven by volunteers for handicapped, senior, and transit disadvantaged citizens. Donation fare. Call for reservations 24 hours in advance.

INTERCITY VALLY VAN, 2330 Roberto St., Napa, CA 94558 Enterprise 12908 252-2600
Transportation between Napa, Yountville, St. Helena, and Calistoga for physically and mentally handicapped. Wheelchair lift available. Picks up at home within one mile on either side of Highway 29. Fee varies.

VOLUNTEER CENTER TRANSPORTATION, 1801 Oak St., Napa, CA 94558 252-6222
Offers rides for Napa County residents, including developmentally disabled clients who are in need of this service. Daily phone requests are taken and filled through a volunteer driver.

National organizations are listed when there is no local association.

ASSOCIATION FOR CHILDREN WITH LEARNING DISABILITIES
5225 Grace St., Pittsburg, PA 15236 (412) 881-1191

CALIFORNIA ASSOCIATION FOR NEUROLOGICALLY HANDICAPPED CHILDREN-Napa Chapter
2372 Ethel Porter Dr., Napa, CA 94558

CALIFORNIA ASSOCIATION OF PHYSICALLY HANDICAPPED-Napa-Solano Counties
1032 Delbrook Dr., Napa, CA 252-4960

CALIFORNIA COUNCIL OF THE BLIND
900 Geary St., San Francisco, CA 94109 (415) 441-1151

CALIFORNIA COUNCIL FOR EXCEPTIONAL CHILDREN-Napa Chapter

CLOSER LOOK
Box 1492, Washington, D.C. 20013

DOWN'S SYNDROME CONGRESS
20438 Renfrew Rd., Detroit, MI 48221

EASTER SEAL SOCIETY FOR PHYSICALLY HANDICAPPED CHILDREN AND ADULTS-Napa
P.O. Box 3149, 1767 Laurel St., Napa, CA 94558 226-5364

MUSCULAR DYSTROPHY ASSOCIATION OF AMERICA
1508 Mini Dr., Vallejo, CA 552-6171

NAPA VALLEY ASSOCIATION FOR THE RETARDED (NVAR)
P. O. Box 2867, Napa, CA 94558 255-0177

NATIONAL ASSOCIATION FOR THE DEAF
814 Thayer Ave., Silver Springs, MD 20910 (301) 587-1788

NATIONAL ASSOCIATION FOR DOWN'S SYNDROME
628 Ashland Ave., River Forest, Illinois 60305

NATIONAL SOCIETY FOR AUTISTIC CHILDREN
%Dorothy Miller, 15 Chenin Ct., Pleasant Hill, CA 94533 (415) 933-77756

NATIONAL TUBEROUS SCLEROSIS ASSOCIATION
P. O. Box 159, Laguna Beach, CA 92652 (714) 494-8900

ORTON SOCIETY (Dyslexia)
8415 Bellona Lane, Towson, MD 21204 (301) 296-1232

SPINA BIFIDA ASSOCIATION OF AMERICA
343 South Dearborn, Room 319, Chicago, Illinois 60604

UNITED CEREBRAL PALSY
120 North El Camino Real, San Mateo, CA 94401 (415) 348-1641

WESTERN REGIONAL EPILEPSY FIELD OFFICE, E.F.A.
6117 Reseda Blvd., Suite 6, Reseda, CA 91335

INFANT PROGRAMS

NAPA INFANT PROGRAM - See Education Listing

MARIN COUNTY PROGRAM FOR INFANTS WITH HEARING HANDICAPS, A.E. Kent School Annes, 250 Stadium, Kentfield, CA 94904 (415) 456-0851
Home visits and parent discussion groups are available.

VARIETY CLUB BLIND BABIES FOUNDATION, 25 Taylor St., San Francisco, CA 94102 (415) 673-2554. Provides an itinerant teacher for children with visual handicaps.

PRE-SCHOOL PROGRAMS

Information regarding programs for pre-school (3-5yrs.) children available from:
Napa County Office of Special Education 224-3151
Director: Bernice Bettencourt

Napa Valley Unified School District 252-5568
(Speech handicapped, aphasia, severe oral language, deaf and hard of hearing, visually impaired; 3-5yrs.)
Director: Austin Kelly

Napa Valley Head Start, 703 Jefferson St., Napa, CA 252-8931
A child development program which welcomes enrollment of mentally and physically handicapped children of pre-school age in regular programs. Call for additional information.

Many nursery schools and pre-schools in our county are eager to serve children with special needs. Call Rainbow Childcare Council 253-0366

SCHOOL-AGE PROGRAMS

NAPA COUNTY OFFICE OF SPECIAL EDUCATION, 4032 Maher St., Napa, CA 224-3151

The county provides programs for children who have mild, moderate, or severe retardation, autism, multihandicaps, and educational handicaps. Orthopedic handicaps are also served. For more information contact the office. Assistant Superintendent of Special Services: Harlan Smetzer.

NAPA VALLEY UNIFIED SCHOOL DISTRICT, 2425 Jefferson St., Napa, CA 252-5568

The Unified District provides services to mildly retarded, educationally handicapped (learning disabled), hearing and vision impaired, and speech and language disabled. For more information contact the office of special education. Director: Austin Kelly

MAINSTREAMING - An increasing number of children with special needs attend regular classes with an aide or other support as needed. School district have classes for children with learning disabilities and speech or oral language problems. For more information, call your local school district.

COUNSELING SERVICE

Catholic Social Service of Napa County, 2510 Old Sonoma Rd.,...224-4403
Napa. Referral service and linkage with other agencies.

Family Service of the North Bay, 1157 Division St., Napa.....255-0966
Professional social work with individuals and families whose problems may interfere with personal or social adjustment.

Napa County Mental Health Services, 2344 Old Sonoma Rd.,.....253-4561
Napa. Information, consultation and a wide range of mental and emotional treatment programs. Fees are based on ability to pay.

North Bay Regional Center, 1710 Soscol Ave., Napa.....252-0444
Provides counseling and coordinating services for eligible clients. Refer to "Initial Contacts" for more information. Referrals for professionals in private practice available from Jean Leonard, 252-0444.

HOT LINES

COPE - Child or Parent Emergency 252-1116 (24 hr.) 252-1123 (office)

24 hour telephone crisis intervention lines, information, and referral. Relief babysitting provided to relieve family stress including sitters capable of caring for handicapped children.

HELP LINE - 2344 Old Sonoma Rd., Napa, CA. 944-2212

Crisis intervention and listening service. 24 hour crisis line. Referral to community agencies.

PARENT GROUPS

CANAC - California Association for Neurologically Handicapped Children, Napa Chapter, 2372 Ethel Porter Drive, Napa, CA 255-4621

CANAC is a non-profit organization for parents, teachers and professionals with the goal of helping neurologically handicapped individuals and informing the public of services available.

NVAR - Napa Valley Association for the Retarded, P.O. Box 2867, Napa, CA.

NVAR promotes activities for the practical development of the mentally retarded, educates the general public in inderstanding and accepting mentally retarded people, acts as an advocate for the rights and needs of these people through political and social involvement at the local, state, and federal levels.

POEC - Parents of Exceptional Children 224-3916, 253-0808

POEC is an organization of parents with children who are physically or mentally limited. Serves as a parent support group. Meets on the third Wednesday of the month with a speaker of interest to parents of disabled children.

EMERGENCY NUMBERS

Police or Sheriff.....253-0911

Piners Ambulance.....252-4911

Police Departments
Calistoga.....942-6262
Napa.....253-0911
St. Helena.....963-3636

24-HOUR HOSPITAL EMERGENCY ROOMS

Permanente Medical Group, Napa Emergency - 255-7825
Vallejo Emergency - 1-644-5631

Queen of the Valley.....252-4411

St. Helena Hospital.....963-3611

CRISIS INTERVENTION

Crisis Line.....963-2555
Napa County Mental Health.....253-4561
COPE.....252-1116
Help Line.....944-2212

NURSING AND HOMEMAKER SERVICE

Napa County Public Health.....253-4461

INFORMATION AND REFERRAL

Napa County Library.....253-4241

Compiled by PARENT TO PARENT
Napa, California 94558

Appendix D

NIP Curriculum System Description

NIP Curriculum System Binder

TABLE OF CONTENTS

Guide to Using the NIP Curriculum System

Unit Index

Card Index

Unit List with Titles

Label Copying Guide

Label Pages in Pockets 1-29

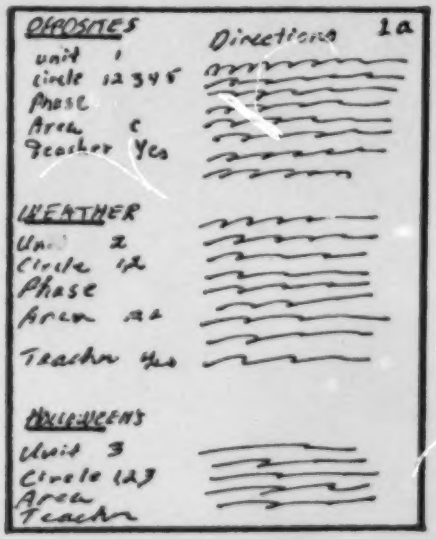
Originals of Label Pages

GUIDE TO USING THE NIP CURRICULUM SYSTEM

Definitions

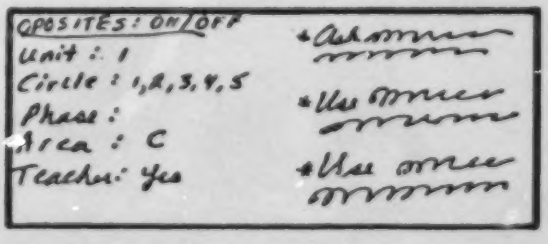
Card

There are 523 5 x 8" cards in the system. Each card is made up of several units (activities). The cards are classified according to circle group (ability) level and housed in the large metal drawers. The cards are numbered in the upper right corner. "a" indicates the first part of a two-part card; "b" indicates the continuation of a card.



Unit

There are 166 units in the system. Each unit is an instructional activity. The units are coded by TITLE, circle, phase, area, and teacher.



TITLE is the abbreviated title of the unit.

Circle indicates the circle group or groups in which the unit appears (units reoccur throughout circles).

Phase indicates the phase of the San Juan curriculum the unit is relevant to. This is currently blank and can be filled in by teachers as appropriate.

Area indicates the curriculum area the unit is relevant to. There are seven curriculum areas:

Cognitive	Expressive Language
Gross Motor	Receptive Languate
Fine Motor	Seasonal
Social Emotional	

Teacher indicates the need for a teacher to conduct the unit activity (yes or no). If "no" appears, an aide, student, or parent can implement the unit activity.

Organization

The 523 cards, made up of several units each, are contained in the large metal drawers and classified according to circle groups one through five by level of difficulty. "Group cards" and "holding cards" are also contained in the large metal drawers.

Each of the 166 units (activities) is contained on an individual 3 x 5" card. The units are classified according to curriculum area (cognitive, gross motor, fine motor, social emotional, expressive language, receptive language, and seasonal). The units are numbered and compiled in the small metal box. The

units are numbered within each curriculum area consecutively, but not continuously. The units have the same number as given on the card and since the organization has altered, the number is not necessarily continuous.

Using the Curriculum Cards

Step 1

Select the circle group you intend to teach.

Step 2

Look through the cards filed behind the selected circle group number for the combination of activity units you desire. (Many activity units will appear on more than one card).

Step 3

Select the card that best reflects the curriculum areas you intend to teach.

Step 4

Read the directions on the right-hand side of the card and implement the units.

Making Up New Cards

The NIP Curriculum System is designed so that new curriculum cards can be created quickly and methodically.

Step 1

Decide on the curriculum area and circle group you wish to teach.

Step 2

Look through the small unit file box for unit activities (2 or more) appropriate to the curriculum area you intend to

teach and the circle group the activity will be used for.

Step 3

Select units from the unit File box and jot down the numbers.

Step 4

Check the card index to be sure the combination of units you created has not already been compiled.

Step 5

Refer to the NIP Curriculum System Binder. Check the unit index on the first page for the label pages on which the selected units appear. The units are listed by number in the left column, the label pages in the right column. The label pages were organized for cost efficiency in photocopying the labels, so many units appear on more than one label page. (It doesn't matter which of the listed pages you take the label from if there are more than one).

Step 6

Find the correct label pages located behind the index in the pockets numbered from 1-30. Peel off the selected unit and apply the labels to a blank 5 x 8 index card (located in the rear of the metal box drawers under "Blank Cards."

Step 7

Number your new card with the next consecutive number for the system.

Step 8

Add your new card number to the card index (located behind these directions in the binder) with the accompanying units you

have used.

Step 9

File the new card in the card file drawer under the appropriate circle group.

Making Copies of the System

The system has been designed so that it can be reproduced without excessive cost for other infant programs. Originals of all units are included at the back of the binder. Use Avery Brand self-adhesive address labels for copying (Stock #5352). They come in boxes of 100 sheets, 8½ x 11". Each box contains 1000 labels. You will need at least 3 boxes of Avery labels to copy one set of the cards. Refer to the Label Copying Guide in this binder for the number of copies to make of each page. You will need 550 5 x 8" cards to adhere the labels to. Use the card index in compiling the new cards.

Appendix E

Curriculum Units

STACKING TOY
Unit: 123
Circle: 3, 4
Phase:
Area: Fine Motor
Teacher: Yes

*For a simpler task, ask the child to only take the rings off.
*For a simpler task, ask the child to replace fat rings on a narrower pole.
*Ask child to stack in imitation to a model.

STACKING TOY
Unit: 123
Circle: 3, 4
Phase:
Area: Fine Motor
Teacher: Yes

*For a simpler task. ask the child to only take the rings off.
*For a simpler task, ask the child to replace fat rings on a narrower pole.
*Ask child to stack in imitation to a model.

MATCH COLORS
Unit: 37
Circle: 1, 2, 3
Phase:
Area: Cognitive
Teacher: Yes

*Use 1 inch blocks and color sheets
*Use truck, book, and small vehicles
*Match color of vehicle to picture in book

MATCH COLORS
Unit: 37
Circle: 1, 2, 3
Phase:
Area: Cognitive
Teacher: Yes

*Use 1 inch blocks & color sheets
*Use truck, book, & small vehicles
*Match color of vehicle to picture in book.

OPPOSITES: HOT/COLD
Unit: 32
Circle: 1,2,3,4,5
Phase:
Area: Cognitive
Teacher: Yes

*Tubs of water, feel hot and cold
*Identify pictures of objects that are hot and cold.
*Examples: candle, kettle, coffee, ice, ice cream, juice can.
*Hot water in a red balloon, cold water in a blue balloon, hair dryer.
*For variety, have child retrieve an object from the water.

OPPOSITES: HOT/COLD
Unit: 32
Circle: 1,2,3,4,5
Phase:
Area: Cognitive
Teacher: Yes

*Tubs of water, feel hot and cold.
*Identify pictures of objects that are hot & cold.
*Examples: candle, kettle, coffee, ice, ice cream, juice can.
*Hot water in a red balloon, cold water in a blue balloon, hair dryer.
*For variety, have child retrieve an object from the water.

Appendix F

Data Sheet for Evaluation

CASE NUMBER _____

BIRTHDATE _____

HANDICAPPING CONDITION _____

DATE ENTERED PROGRAM _____

FAMILY SITUATION
1. natural ____
2. foster ____
3. adopted ____
4. relative ____

CLASSROOM
1. Wintum classroom ____
2. home based ____
3. combination ____

PARENTAL SITUATION
1. single parent ____
2. two parent family ____

	1	2	3	4	5
Age at Admin. of Bayley					
Mental index or 999					
Raw score or 999					
Age at admin. of Stanford					
Age in mos. on Stanford					
Age at admin. on Reel					
Age in mos. on Exp. Reel					
Age in mos. on rec. Reel					
Age at admin. on Lap					
Age in mos. on Lap					
Age in mos. at admin Help: Language					
Gross Motor					
Social					
Self Help					

	1	2	3	4	5
Age in Mos. at admin of Brigance: A					
B					
C					
D					
F					
G					
H					

Appendix G

WESTAR Technical Assistance Agreements

TENTATIVE ___ FINAL X

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12D1

Page 1 of 4 pages

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coordin.

CITY/STATE Rohnert Park, CA

WESTAR CONTACT Joan Karp

TA OBJECTIVE	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES	EVALUATION OUTCOMES
To assist the project in developing an indepth management plan for all five program components which will facilitate a delineation of short- and long-range objectives, timelines, evaluation variables, and assignment of responsible persons for each objective.	1. Project staff will cooperatively develop the plan with the project director and coordinator.	1. Project Staff	1. On-going	1. Completion of TA evaluation form by project staff.	1. Measure of project satisfaction with TA activity.
	2. WESTAR will send examples of project plans.	2. Joan Karp	2. On-going	2. Telephone confirmation and review of material with project coordinator & WESTAR contact person.	2. Documentation of project satisfaction.
	3. Project will send a copy of the finalized management plan to WESTAR contact person.	3. Project Staff	3. Nov. 10, 1979	3. Copy of final management plan by project staff sent to WESTAR.	3. Completed document on file.
	4. WESTAR will review and provide feedback to project about the finalized project management plan.	4. Joan Karp	4. Dec. 15, 1979	4. Telephone conference between project coordinator & WESTAR contact person to provide feedback about the management plan.	4. Documentation of project satisfaction.

PRIORITY # 1

PROGRAM AREA Administration Management

PROJECT DIRECTOR SIGNATURE _____ DATE _____

WESTAR SIGNATURE Thomas L. Karp DATE 12/3/79

WESTAR

TENTATIVE ___ FINAL X — TECHNICAL ASSISTANCE AGREEMENT — ID # 12D1

Page 2 of 4 pages

PROJECT NAME Pediatric Intervention Program — PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coordin.

CITY/STATE Rohnert Park, CA — WESTAR CONTACT Joan Karp

TA OBJECTIVE	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES	EVALUATION OUTCOMES
To assist the project in developing an on-going classroom data collection system which can be incorporated into the overall project evaluation design. The specific training focus will be on: 1) strategies for collecting child progress data, and 2) coordinating the activities of the project educational team.	1. Two project staff (the coordinator and 1 teacher) will receive training at the Experimental Education Unit (EEU) at the University of Washington. This training will include: A) observation training and consultation with Jean Kelly, head teacher for Infant Program, 2 days, and B) consultation with Owen White regarding on-going data collection procedures which can be incorporated into the overall project evaluation. (1.5 days)	1. Joan Ruskus Coordinator 1 classroom teacher	1. Jan. 30, 1979	1. Completion of TA evaluation form by the 2 participating staff members.	1. Measure of project satisfaction with TA activity.
	2. Participating project staff will prepare a report which describes the manner in which the training elements will be incorporated into the project classroom activities and evaluation design.	2. Joan Ruskus, Coordinator 1 classroom teacher	2. Feb. 29, 1980	2. Completion of a report describing the impact of EEU training on classroom activities and evaluation design.	

PRIORITY # 2

PROGRAM AREA Staff Development

PROJECT DIRECTOR SIGNATURE ___ DATE ___

WESTAR SIGNATURE Tom's G. Haring DATE 12/3/79

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WESTAR

TENTATIVE ___ FINAL x TECHNICAL ASSISTANCE AGREEMENT ID # 1201

Page 3 of 4 pages

PROJECT NAME Pediatric Intervention Program PROJECT DIRECTOR Thomas Cooke, Joan Ruskus, Coordin.

CITY/STATE Rohnert Park, CA WESTAR CONTACT Joan Karp

TA OBJECTIVE	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION	
				ACTIVITIES	OUTCOMES
To assist the project in designing an evaluation design which will include formative and summative data collection processes. The intent of the evaluation design will be two-fold: 1) gather data which will help develop the program and conceptualize what the program is and how it works; 2) gather data which will provide the basis for total outcome statements.	1. Project coordinator will attend the 2-day evaluation workshop scheduled for Feb. 5-6, 1980.	1. Joan Ruskus	1. Feb. 5-6, 1980	1. Completion of workshop evaluation form by workshop participant.	1. Measure of participant satisfaction with TA activity.
	2. Project coordinator will complete the project evaluation design and send a copy to WESTAR.	2. Joan Ruskus	2. Mar. 30, 1980	2. Final copy of the project evaluation design will be sent to WESTAR.	2. Evaluation design on file.
	3. WESTAR will review and provide feedback to project about the finalized evaluation design.	3. Joan Karp	3. Apr. 15, 1980	3. Telephone conference between project coordinator and WESTAR contact person to provide feedback about the evaluation design.	3. Documentation of project satisfaction.

PRIORITY # 3

PROGRAM AREA Evaluation

PROJECT DIRECTOR SIGNATURE ___ DATE ___ WESTAR SIGNATURE Joan G. Karp 12/13/79 DATE

G-3

WESTAR

TENTATIVE ___ FINAL X — TECHNICAL ASSISTANCE AGREEMENT — ID # 12D1

PROJECT NAME Pediatric Intervention Program — PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coordin.

CITY/STATE Rohnert Park, CA — WESTAR CONTACT Joan Karp

TA OBJECTIVE	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION	
				ACTIVITIES	OUTCOMES
To assist the project in developing the parent component, with special focus on: 1) strategies for assessing parental needs 2) parent training activities; 3) direct services to parents; 4) evaluation strategies for measuring satisfaction with the program and the outcome of the program on child progress.	1. WESTAR will send material related to parent training programs to project staff.	1. Project Staff	Oct. 30, 1979	1. Telephone confirmation and review of material with project coordinator and WESTAR contact person.	1. Documentation of project satisfaction.
	2. One project staff member will attend the 2-day Parent Involvement Workshop.	2. 1 project staff	2. Jan. 22-24, 1980	2. Completion of workshop evaluation form by workshop participant.	2. Measure of participant satisfaction with TA activity.
	3. Project staff will prepare and send to WESTAR a report which describes the manner in which the information received at the workshop will be incorporated into the project parent program.	3. 1 project staff	3. Feb. 15, 1980	3. Completion of the report describing the impact of the workshop activities on the project parent program.	3. Completed report on file.

PRIORITY # 4

PROGRAM AREA Services to Parents

PROJECT DIRECTOR SIGNATURE ___ DATE ___

Janis G. Haring — WESTAR SIGNATURE — DATE Dec 3, 1979

WESTAR

ID # 12 D 80

TECHNICAL ASSISTANCE AGREEMENT

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coord.

CITY/STATE Rohnert Park, CA

WESTAR CONTACT Kathleen Stremel-Campbell

TA OBJECTIVE # 1	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
Project staff will develop a written plan with objectives and timelines for meeting JDRP requirements.	1. Key project staff will spend two (2) days with WESTAR consultant. 2. Consultant will provide two days of inservice specific to projects objectives, evaluation design and data. 3. Evaluation information will be forwarded to WESTAR as per time lines. 4. WESTAR will pay for two days of consultant travel and per diem.	Key Project Staff	By May, 1981	1. Final written plan with objectives and timelines specified. 1 copy submitted to WESTAR by July, 1981. - Consultant report on file at WESTAR. - TA evaluation form completed by project staff and received by WESTAR within two weeks of TA activity.

Area: SC SP SD DD AD (EV)

Primary Mode:
(WESTAR on-site)
workshop
rev/critique
TR/UW
information
CONSULTANT SATELLITE

PROJECT DIRECTOR SIGNATURE _____ DATE _____

WESTAR SIGNATURE Dolores Brookins DATE 11-10-80

TAA 9/80

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 0 80

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coordinator

CITY/STATE Rohnert Park, CA

WESTAR CONTACT Kathleen Stremel-Campbell

TA OBJECTIVE # 2	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
Project staff will develop demonstration methods and dissemination products specific to audio-visual and printed product.	1. Project will select one staff member to attend Demonstration/ Dissemination Workshop. 2. WESTAR will pay travel and per diem for one person for three (3) days to attend topical workshop.	Project Coord., Joan Ruskus	By May 1, 1981	1. Written outline of types of dissemination materials to be developed and methods of dissemination. 2. Objectives and timelines for development of products. 3. Number and types of project demonstrations. 1 copy of each submitted to WESTAR. - TA evaluation form completed by project staff and received by WESTAR within two weeks of the DD Workshop.

Area: SC SP SD (DD) AD EV

Primary Mode:
WESTAR on-site
(workshop)
rev/critique
TR/UW
information
CONSULTANT SATELLITE

PROJECT DIRECTOR SIGNATURE DATE

Julie Brookfield 11-10-80
WESTAR SIGNATURE DATE

TAA 9/80

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

D # 12 0 80

ROJECT NAME Pediatric Intervention Program

ITY/STATE Rohnert Park, CA

PROJECT DIRECTOR Thomas Cooke/Joan Ruskus, Coordinator

WESTAR CONTACT Kathleen Stremel-Campbell

TA OBJECTIVE # 2	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
oject staff will develop monstration methods and ssemination products ecific to audio-visual d printed product.	1. Project will select one staff member to attend Demonstration/ Dissemination Workshop. 2. WESTAR will pay travel and per diem for one person for three (3) days to attend topical workshop.	Project Coord., Joan Ruskus	By May 1, 1981	1. Written outline of types of dissemination materials to be developed and methods of dissemination. 2. Objectives and timelines for development of products. 3. Number and types of project demonstrations. 1 copy of each submitted to WESTAR. - TA evaluation form completed by project staff and received by WESTAR within two weeks of the DD Workshop.

: SC SP SD (DD) AD EV

ary Mode:
ESTAR on-site
(workshop)
rev/critique
TR/UW
information
ULTANT SATELLITE

PROJECT DIRECTOR SIGNATURE DATE

Judi Brookfield 11-10-80
WESTAR SIGNATURE DATE

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Thomas Cook, Dir.; Joan Ruskus, Coord.

CITY/STATE Rohnert Park, CA

WESTAR CONTACT Kathleen Stremel-Campbell

TA OBJECTIVE # 1	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
Project staff will develop parent training materials specific to ethnic differences in: a) Child Dev. b) Language c) Cultural activities for Hispanic, Asian, and Indo-Chinese parent population within the project. These materials are part of the Parent Training Module.	1. Project staff will locate a consultant who has expertise in developing materials for various ethnic groups (Leah Stachow) 2. Project staff will work with consultant to coordinate the Parent Training Module Objectives with the cross-cultural child development, language, and cultural-social aspects specific to each ethnic group. 3. Consultant will review parent training materials. 4. WESTAR will pay consultant 4 days honorarium at $100/day and up to $100. for travel .	Joan Ruskus	June 15, 1981	1. Final copy of parent training materials on file at WESTAR by August 15th. 2. Final copy of survey developed to accompany parent training materials indicating: - appropriateness - use - shared with others 3. Consultant report on file at WESTAR by July 30th. 4. TA evaluation form completed by project staff within two weeks of TA activity.

Area: SC (SP) SD DD AD EV

Primary Mode:
WESTAR on-site
workshop
rev/critique
TR/UW
information
(CONSULTANT) SATELLITE

PROJECT DIRECTOR SIGNATURE 7/16/81 DATE

WESTAR SIGNATURE Jeffri Broadfield 6/2/31 DATE

TAA 9/80

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Thomas Cook, Dir.; Joan Ruskus, Coord.

CITY/STATE Rohnert Park, CA

WESTAR CONTACT Kathleen Stremel-Campbell

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Primary Mode:
WESTAR on-site
workshop
rev/critique
TR/UH
information
(CONSULTANT) SATELLITE

K. Cook 7/16/81
PROJECT DIRECTOR SIGNATURE DATE

Jeffri Brookfield 6/2/81
WESTAR SIGNATURE DATE

TAA 9/80

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

CITY/STATE Rohnert Park, CA

PROJECT DIRECTOR Thomas Cook Dir.; Joan Ruskus, Coord.

WESTAR CONTACT Kathleen Stremel-Campbell

TA OBJECTIVE # 3	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
Project staff will develop an audio slide tape show designed for the purpose of increasing child referrals to the program. The target audience will be: - community resources - school personnel - parents - local pediatricians	1. Project staff will locate consultant. 2. Project staff will write a story board describing each model component. 3. Consultant will review storyboard 4. Consultant will provide suggestions for slides to depict storyboard narrative. 5. Consultant will provide an inserivce to project staff re: shooting slides, editing, and sinking the slides and audio. Possible consultants: Hank Brook - or Michael Hogan 6. WESTAR will pay for four days of consultation at $100/day and up to $100. for travel	Joan Ruskus	June 15, 1981	1. Completion of slideshow by August 15t 2. Survey indicating appropriateness and satisfaction of slideshow. 3. Number of referrals based on slideshow on file at project site. 4. Consultant report on file at WESTAR by July 30th. 5. TA evaluation form completed by project staff within two weeks.

rea: SC SP SD (DD) AD EV

rimary Mode:
WESTAR on-site
workshop
rev/critique
TR/UU
information
(NSULTANT) SATELLITE

PROJECT DIRECTOR SIGNATURE Thomas P. Cook DATE 7/16/81

WESTAR SIGNATURE Jeffrey Braithwaite DATE 6/2/31

TAA 9/80

78

79

G-10

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

CITY/STATE Rohnert Park, CA

PROJECT DIRECTOR Thomas Cook, Dir.; Joan Ruskus, Coord.

WESTAR CONTACT Kathleen Stremel-Campbell

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Area: SC SP SD (DD) AD EV

Primary Mode:
WESTAR on-site
workshop
rev/critique
TR/UW
information
(CONSULTANT) SATELLITE

PROJECT DIRECTOR SIGNATURE H. L. Cook DATE 7/16/81

WESTAR SIGNATURE J Brookfield DATE 6/2/81

TAA 9/80 G-11

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Joan Ruskus

CITY/STATE Rohnert Park, California

WESTAR CONTACT Jeffri Brookfield

TA OBJECTIVE # 1	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
The project will convert computer lanuage from SPSS to AIDA for purposes of completing the data analysis on the Services to Children component.	1. Project will telephone Bill Palyo (707-538-0327), Assoc. of Beh. Consultants, to determine his appropriateness to provide consultation. 2. WESTAR will provide travel, per diem and honorarium (within cost limitations) for on-site consultation. 3. Project will complete conversion from SPSS to AIDA.	Project Coordinator	Nov 81	Documentation • Consultant will provide WESTAR with a written summary of the assistance provided. Satisfaction • Project will complete a TA evaluation form within two weeks of consultation. Demonstration of Implementation • Copy of final year end report.

Area: SC SP SD DD AD FEV

Primary Mode:
WESTAR on-site
workshop
rev/critique
TR/UW
information
CONSULTANT SATELLITE

M. V. Cooke 11/24/81
PROJECT DIRECTOR SIGNATURE DATE

Jeri Domingues 11/13/81
WESTAR SIGNATURE DATE

TAA 9/80

WESTAR
TECHNICAL ASSISTANCE AGREEMENT

ID # 12 D 80

PROJECT NAME Pediatric Intervention Program

PROJECT DIRECTOR Joan Ruskus

CITY/STATE Rohnert Park, California

WESTAR CONTACT Jeffri Brookfield

TA OBJECTIVE # 2	TA ACTIVITIES	TARGET STAFF	TARGET DATE	EVALUATION ACTIVITIES, RESPONSIBILITIES
Project will develop a plan for collecting and utilizing cost analysis/ cost benefit procedures.	1. Project will provide WESTAR with information requested during a workshop planning survey.	Project Director	Dec.1981 Jan.1982	Documentation • Project will provide WESTAR with a copy of the completed plan.
	2. WESTAR will provide travel and per diem for one project staff member to attend WESTAR cost-analysis topical workshop.	Feb.1982		Satisfaction • Project will complete workshop evaluation form. • Project will complete TA evaluation form.
	3. Project staff will complete cost-analysis plan.			Demonstration of Implementation • Project will provide WESTAR with a sample of the preliminary data collected in accordance with the plan by June 15, 1982.

Area: SC SP SD DD (AD) EV

Primary Mode:
WESTAR on-site
~~workshop~~
rev/critique
TR/UW
information
CONSULTANT SATELLITE

B. V. Parker 11/24/81
PROJECT DIRECTOR SIGNATURE DATE

Joan Domingues 11/4/81
WESTAR SIGNATURE DATE

TAA 9/80

Appendix H

NIP Involvement with SERN

DEMONSTRATION SITE TRAINING COMPONENT /

The demonstration site component of the Infant/Preschool SERN will be developed systematically, utilizing the expertise and resources of representatives of each demonstration site. The process is designed as follows:

Development of Training Materials: The demonstration site training will be developed so that a consistent core content will be provided at each of the sites, with each program adding its own unique emphasis. The core concepts of the training will be based on the issues presented in the most recent draft of the "Preschool Guidelines".

Representatives from each of the demonstration sites will meet together for five days to discuss important training issues, to develop a format for training, to develop materials, to discuss and problem solve any potential problems that might occur and to devise training experiences which will maximize impact on participants.

It is our goal to develop training which provides participants with relevant skills that can be readily implemented into their program in order to improve services for young children with exceptional needs and their families. We have a strong commitment to stress family involvement, the team approach and the importance of early intervention. Training concepts will be based on current research in the field of early childhood special education.

The resulting training materials will be reviewed by the demonstration site trainers and revised as necessary.

Field Testing the Training: Each demonstration site will conduct a "run through" training with all of the staff at the site. This process will hopefully identify any "bugs in the system" and will inform all staff at the demonstration site of procedures and expectations.

Field Test Revisions: Following the field test, demonstration site trainers will meet again to discuss any difficulties encountered. Revisions in the training will be made, as necessary. Following each training session at a demonstration site, trainers will have the opportunity to meet again and make additional revisions.

Training: The actual training will be conducted in three phases: 1) A two day on-site needs assessment/overview; 2) Three day demonstration site training; and 3) Follow up technical assistance. It is proposed that the training involve all members of a program's team, including administrators, specialty therapists, teachers, aides, parents, etc.

Demonstration Site Training Component
Page 2

1. On site needs assessment/overview. Programs requesting training will be informed of the training model and will be asked to sign an inservice agreement form, which delineates responsibilities of the program and the trainers. Infant/Preschool SERN staff will conduct a two day on-site visit to the program.

   The proposed schedule and content is as follows:

   Day 1 - A.M. - Observe classrooms, interview staff and administrators.

   Day 1 - P.M. - With the entire staff (including administrators) conduct a needs assessment/program quality review and use this process to build consensus and prioritize training needs.

   Day 2 - All Day - Overview of core concepts of training with an emphasis on priority topics identified in the needs assessment process.

   Programs will be provided with a list of demonstration sites which could best meet their needs and choose one.

2. Demonstration site training: A team from the program requesting training will attend training at the demonstration site for three days. This team will involve all staff including administrators, teachers, specialty therapists, parent specialists, parents, etc. for the first day of training. The second and third day of training will be oriented to direct service providers such as teachers and specialty therapists. Demonstration site trainers will be provided with the results of the needs assessment process in order to plan for the training group.

   Day 1 - The entire group of trainees will receive an overview of the program model and tour the program so that a comprehensive service delivery model for children from birth to 5, utilizing an interdisciplinary team approach, will be demonstrated.

   The trainee group will have opportunities to talk with interdisciplinary staff members (particularly those of similar disciplines) to ask questions and discuss the program model.

Days 2 & 3 - A.M. - Intensive "hands on" experiences will be provided in various settings of the program, based on the participants' needs and interests.

Days 2 & 3 - P.M. - Debriefing of experiences and discussion/ training on priority training topics will be conducted.

3. Follow up technical assistance: One to two months following the demonstration site training experience, the program will receive one day of follow up technical assistance from the demonstration site trainer in implementation of quality services for young children with exceptional needs and their families. An additional day of follow up technical assistance will be provided by an Infant/ Preschool SERN staff member. Programs will be asked to evaluate the training experience so that we can improve the demonstration site component based on this feedback.

Appendix I

Napa Infant Conference Tapes

Sonoma State University

California Institute on Human Services
707 664-2416

The Napa Infant Program recently sponsored a conference on the infant and young child with special needs. Highlights of the conference were presentations by Berry Brazelton, Burton White, and Kathyrn Barnard.

Videotapes of the keynote addresses of these nationally significant professionals, are available from the county office.

Also available on loan are cassettes of both the keynotes and all the workshops presented during this three day conference.

Below you will find a list of the workshop titles available.

* 01. DOES THE INFANT SHAPE HIS WORLD? - T. Berry Brazelton (2 tapes)
* 02. UTILIZING NEW INFORMATION IN PROMOTING OPTIMAL DEVELOPMENT OF YOUNG CHILDREN -B. White (2 tapes)
03. PARENT-CHILD INTERACTION: ELEMENTS THAT INFLUENCE LATER CHILD DEVELOPMENT - K.E. Barnard
04. CAN WE PREDICT DISABILITIES IN EARLY CHILDHOOD FROM STANDARIZED INFANT TEST? - J. Hunt,
05. ASSESSMENT: FRAMEWORK FOR INTERVENTION - R. Zelle
06. THE ROLE OF OBSERVATION IN THE ASSESSMENT OF INFANTS & YOUNG CHILDREN - M. Steward
07. THE IMPACT OF THE CAREGIVER ON THE INFANT & YOUNG CHILD - T. Berry Brazelton, C. Groves, J.R. Lally, F. Knudtson, S. Crockenberg
08. PARENTAL REACTIONS TO THE BIRTH & CARE OF A HANDICAPPED CHILD: IMPLICATIONS FOR EARLY INTERVENTION - C. Groves
09. TRAINING INFANT CAREGIVERS - J.R. Lally
10. IDEALS & MISDEALS...FROM HOSPITAL TO HOME TO COMMUNITY - F. Knudtson, P. Gorski
11. A DISCUSSION GROUP WITH DR. BRAZELTON FOR PROFESSIONALS CURRENTLY USING THE NEONATAL SCALE
12. ISSUES IN ASSESSMENT: WHAT IS... WHAT SHOULD BE - J. Hunt, R. Zelle, M. Steward, B. Grundland
13. WORKING WITH PARENTS & INFANTS: INFANT PLAY - R. Bromwich
14. LANGUAGE DEVELOPMENT & FEEDING TECHNIQUES FOR FACILITATION LANGUAGE IN HANDICAPPED SCHOOL CHILDREN - T. Lewis
15. PROMOTING ADAPTATION IN MOTORICALLY INVOLVED INFANTS & YCUNG CHILDREN - K. Snorf
16. A DISCUSSION ON PROCEDURES TO USE & AVOID WITH INFANTS & YOUNG CHILDREN & THEIR APPLICATION IN CREATING OPTIMAL ENVIRONMENTS FOR THEM - B. White, M. Newcombe, M. Gerber, K. Peterson, N. Gilien
17. CROSS-CULTURAL INFLUENCES ON EARLY INFANT DEVELOPMENT - M. Newcombe
18. THE R.I.E. PHILOSOPHY - M. Gerber
19. HEALTH PROTECTION & PROMOTION: A MATTER OF STATE ACTION - W. Bronston
20. A CONCEPT OF DEVELOPMENT: A DISCUSSION ON THE IMPORTANCE OF FOSTERING AN INTEGRATED VIEW OF DEVELOPMENT WHEN WORKING WITH HANDICAPPED CHILDREN - B. White, R. Bromwich, T. Lewis, K. Snorf, B. Shears
21. NEEDED SUPPORT FOR CAREGIVER OF INFANTS & YOUNG CHILDREN - J.R. Lally

Appendix J

NIP Brochure

Appendix K

NIP Poster

The Napa Infant Program

Helping Parents Help Their Children

Providing free educational services for children birth through three years with suspected developmental delays.

Napa County Office of Education

(707) 224-3151

Appendix L

NIP Slide Show Narrative

THE NAPA INFANT PROGRAM SLIDE PRESENTATION

Instructions

There are eighty slides in this presentation. The slides have been coordinated to an accompanying tape. If you choose to read the script rather than play the tape, use the enclosed slide descriptors. Change the slide when you hear a click (on the tape) or between numbers if you are reading the script.

Summary

While the primary purpose of the show is to portray the major intervention components, it was also designed to convey the warmth and liveliness of the program. There are eleven sections to the slide show.

		Slides
1.	Introduction	1-12
2.	Educational Programming	13-27
	One to One Activities	
	Small Group Activities	
	Large Group Activities	
3.	Parent Component and Transitional Classroom	28-33
4.	Self Help Program	34-42
5.	Physical Therapy	43-49
6.	Speech Therapy	50-52
7.	Occupational Therapy	53-58
8.	Transportation	59
9.	Data Collection	60
10.	Home-Based Program	61-70
11.	Conclusion and Summary	71-80

1. This slide show is meant to provide you with an introductory peek at a very special place, the Napa Infant Program.

2. We want to introduce you to our students, our teachers and therapists, our philosophy and our methods.

3. The program is both center-based with a classroom

4. and home based in individual students' homes.

5. The program is located in Napa County and administered through the Napa County Superintendent of Schools.

6. We take advantage of our beautiful, hilly surroundings in the heart of California's wine country to play and learn.

7. We take many local field trips and walks exploring our surroundings.

8. Who does our program serve? The Napa Infant Program provides free services to any child who demonstrates a suspected developmental delay or handicapping condition.

9. The children range in age from birth through three years.

10. They vary widely in terms of physical, cognitive, and social developmental levels.

11. The important point about the children in our program is that they are far more similar to normally developing infants and preschoolers than they are different.

12. The staff of the Napa Infant Program have the philosophy that each child is unique and should be respected for his or her own developmental style.

13. Our educational programming is often conducted on a one to one basis.

14. We plan instructional activities to develop gross motor skills,

15. cognitive skills and language skills,

16. fine motor skills,

17. and creative expression.

18. We also provide educational programming in small groups.

19. Small groups allow the teacher to focus on the needs of individual children

20. while providing children with the opportunity to take turns and learn from observing each other.

21. The program staff uses a variety of standardized developmental curricula, and a curriculum designed by our staff especially for our small circle groups.

22. Some activities are conducted in large groups so that the children have an opportunity to interact with one another and a leader in a directed, intentional way.

23. These are some of our most fun times.

24. Children sing together.

25. and get a chance to be the center of attention and lead the group.

26. Field trips are another way we learn as a group.

27. The next door Napa Children's Center is a regular preschool which provides an opportunity for integrated experiences in a group context.

28. Parents are an important part of our program. It is our view that parents are the primary teachers of their children. We

view ourselves as being facilitators of this primary union.

29. Our teachers interact with parents in the transitional classroom. The transitional classroom is offered as a step between home based programming and the center classroom.

30. Here parents get firsthand experience with educational practices.

31. Parents have a chance to interact with one another

32. and see their children interacting with one another.

33. Fathers, too, join in our classroom activities.

34. Self-help skills are a primary focus of the program.

35. Learning to eat and drink independently are goals for many students.

36. The dishes in this slide facilitate the development of eating skills.

37. Sign language is used to teach non-verbal children appropriate ways of indicating their needs at the table. Here the teacher and child are signing cracker.

38. This is the sign for more.

39. No matter how messy the process is, the staff appreciate every bit of improvement and let the students know it!

40. Tooth brushing is part of our feeding program.

41. Toileting is an important self-help target.

42. Dressing is yet another self help skill which our program incorporates.

43. Children in the Napa Infant Program receive regular physical therapy if their individual needs require it.

44. Here we see a boy learning to use his walker to go up and down a curb.

45. He's almost up.

46. Now it's time to come down.

47. The therapist is being supportive while letting the child experience the satisfaction and thrill of learning a new skill.

48. What a neat accomplishment!

49. Here the therapist is using a therapy ball to extend this child's muscles as part of her physical therapy program.

50. Napa Infant Program has a speech therapist on staff who assesses each child's speech and language skills. Some children receive specialized speech therapy.

5i. Language development activities are a part of every student's daily program.

52. Large group circle activities which incorporate rhythm, rhymes, and songs are another way language skills are ehhanced.

53. The program also has an occupational therapist on board.

54. The occupational therapist programs fine motor activities for the children.

55. Fine motor activities involve the use of small muscles rather than large muscles. For example, stacking blocks

56. or manipulating a toy. Fine motor activities are structured into the children's play.

57. Volunteers often join the classroom and direct fine motor activities.

58. Fine motor activities take many shapes and forms and are sometimes edible!

59. A convenient feature of our classroom program is free transportation both to and from the center classroom.

60. After class, teachers take time to record data on the achievements and needs of each student.

61. Our home based program involves a teacher or therapist visiting the child and fmaily at home at least once a week.

62. During this home visit the therapist demonstrates the use of a new brace which will enable this child to stand alone without adult support for the first time.

63. It feels good so far!

64. The therapist demonstrates the use of the brace for the parents.

65. Lood, Dad, no hands!

66. It's important for the child to feel comfortable with new therapeutic devices too!

67. As part of this home visit, the therapist used a pool to provide water therapy.

68. The therapist demonstrates all techniques to the mother so she can continue them throughout the week.

69. There's always a little fun and sharing thrown in.

70. In this instance, a little too much was thrown in!

71. To summarize the highlights of the Napa Infant Program, we provide group activities for educational purposes and for social learning.

72. Small group activities for focused interventions.

73. One to one activities for special times and special learning.

74. A parent program for transitioning children from the home based program to the classroom and for the involvement of parents in their child's educational plan.

75. Self help training for increased independence.

76. Opportunities for children to interact socially.

77. Physical therapy

78. Occupational therapy and fine motor activities.

79. and activities just for the sheer fun of it!

80. That's all the peek you'll get for now! We hope this introduction has not only conveyed the educational and therapeutic nature of our program but also the fun and love that make the Napa Infant Project a very special place for special children.

Appendix M

List of Agencies Requesting

NIP Parents' Strengths and Needs Assessment

Name of Agency	State
Project KEEP PACE	TX
Project LINCS	MO
MARC Center	IL
Developmental Learning Center, Inc.	MN
Washington County Children's Program	MN
Department of Health and Social Services	AL
Fairbanks Rehabilitation Association	AL
University of Pittsburgh, Health Book Center	PA
Educational Technolocy Center, Inc.	RI
Houston Community College	TX
Department of Mental Retardation	CN
The Old Mill School, Inc.	OR
Arkansas Dept. of Human Services	AR
Madison Metropolitan School District	WI
Project Interface	CT
Wabash & Ohio Valley Special Education District	IL
University Hospital	MA
TAC Center	GA
School Board of Leon County	FL
Project ENRICH	AZ
Parsons Research Center	KS
SERN	CA
Wing Lake Developmental Center	MI
Little Tennessee Valley Educational Cooperative	TN

Name of Agency	State
Beachwood City Schools	OH
Wichita Public Schools	KS
Pearl River Infant Project	MS
Connectivut State Department of Mental Retardation	CT
Special Needs Preschool Program	MN
Stark County Board of Mental Retardation and Developmental Disabilities	OH
The Wyman House	NH
Bloomsburg State College	PA
The Kennedy Center	MA
Department of Educational Psychology	Alberta, Canada
Southwest Communication Resources, Inc.	NM
Outreach Project	MS
Education Service Center Region 20	TX
Porter County Special Education Cooperative	IN
Commonwealth of Massachusetts Dept. of Mental Health	MA
Special School District of St. Louis County	MS
Columbia Public School District	MO
Information Center for Developmental Disabilities and Human Services	WI
Scottish Education Department	Glasgow, Scotland
Education Design and Delivery	KY
Orange-Person-Chatham Mental Health Center	NC
Commonwealth of Kentucky Department of Education	KY
Department of Mental Health and Corrections	MN
Multiple Handicap Center of Penobscot Valley	MN

Name of Agency	State
Childrens Memorial Mospital	NE
Jefferson County Public Schools	KY
Cerebral Palsy Center for the Disabled	NY
Education Center	CA
The Authority for Mental Health and Mental Retardation in Harris County	TX
University of Hawaii at Manoa	HI
George Peabody College for Teachers	TN
Elizabeth City-Pasquotank Schools	NC
Northwest Center Infant/Toddler Development Program	WA
MCCSA Head Start	MI
University of Oregon	OR
The Rehabilitation Center, Inc.	NH

Appendix N

Letter of Commitment from Napa County Superintendent of Schools

FLOYD E. SEIFERT
Superintendent

OFFICE OF THE SUPERINTENDENT
NAPA COUNTY SCHOOLS
4032 Maher Street, Napa, California 94558
Telephone (707) 224-3151

LEO M. MILLER
Assistant Superintendent
Business Services

ED HENDERSON
Assistant Superintendent
Educational Services

HARLEN SMETZER
Assistant Superintendent
Special Services

January 19, 1982

Dr. Bill Swan
U.S. Dept. of Education
c/o Dr. Tom Cooke
Calif. Institute of Human Services
Sonoma State University
Rohnert Park, CA 94928

Dear Dr. Swan:

This is to inform you that the services to children enrolled in the Napa Infant Program (NIP) will continue to be supported and administered by the Napa County Office of Education for the 1982-83 school year. We are not only committed to this program locally but California State law has now mandated that these services be ongoing if they were provided during the past few school years.

Presently there are 35 children 0-3 being served in both a home and classroom setting. The classroom is located at 74 Wintun Court in Napa. The staff includes four special education LH/SH teachers, one speech and language therapist, seventeen hours of aide time daily and the services of a school nurse and school psychologist. The 1981-82 budget for this program was $148,604. As you know budgets for the 82-83 school year have not as yet been set.

Sincerely,

Floyd E. Seifert

Floyd E. Seifert
Superintendent

FS:jms